Public Meeting
McGill University Health Centre
Board of Directors

December 9, 2019
16:30 - 18:00
1. Call to Order
2. Quorum
3. Approval of the Agenda
4. Chairman’s Remarks
5. Approval of the previous meeting minutes
6. Business arising from previous minutes
7. Approval of the Consent Items Resolutions
8. Report of the President and Executive Director
9. Varia
10. Question Period
4. Chairman’s Remarks
5. Approval of the previous meeting minutes (September 23, 2019)
6. Business arising from previous minutes
7. Approval of the Consent Items Resolutions
8. Report of the President and Executive Director

8.1 Update by the President Executive Director on Current Matters
Report of the President and Executive Director

Update on the Emergency Rooms

✓ Maintaining pressure at the Ministry level
  • Impact of NSA patients and the overcrowding of our emergency rooms by general cases
  • Possibility of designating certain hospitals or excluding university hospitals to accommodate elderly people who are losing their autonomy or who have general conditions (Article in La Presse on December 3rd)
  • Review of the level of alternative resources in Montreal's west end compared to the east end

✓ Contingency plan
  • Opening of a temporary overflow unit on the 14th floor of the Montreal General Hospital
À souligner

✓ Prix d’innovation au Gala célébration de l’excellence 2019
  • Remis à l’équipe de services techniques pour avoir créé l’hiver dernier une unité temporaire pour les sans-abri au site de l’ancien Hôpital Royal Victoria (1er novembre)

✓ Unité de physique médicale
  • 40e anniversaire du département (7 novembre)

✓ Gala des prix des TI en Santé et Services Sociaux
  • OPAL (8 novembre)
À souligner

✓ Reportage sur l’application OPAL
  • CTV News (24 novembre)
  • Le Devoir – Cahier spécial de l’intelligence artificielle (30 novembre)

✓ Conférence de presse - premier hôpital au Québec à recevoir une deuxième certification LEED Or
  • 3 décembre 2019

✓ Conférence de presse – Remise du Grand prix 2019 de Transplant Québec à Wendy Sherry, infirmière-ressource en don d’organes et de tissus
  • 12 décembre 2019
Osteointegration

✓ Innovative clinical program for amputees
  • A first patient has benefited from osteointegration
  • Discussion with Ontario province regarding an offer of service for osteointegration
Les nominations récentes

➢ Chef de département, Médecine et directeur médicale, Mission de médecine
  ❖ Dr Marc Rodger

➢ Directeur, Qualité, évaluation, performance et éthique
  ❖ Keith Woolrich

➢ Directeur adjoint, Planification et gestion de projets
  ❖ Simon Boisjoly
Rapport du président-directeur général

Les nominations à venir sous peu :

- Chef de département, Radiologie diagnostique
- Chef de département, Chirurgie et directeur médical, Mission de chirurgie
- Directeur exécutif et scientifique en chef de l’Institut de recherche du CUSM
The MUHC, like all other establishments in the province, is facing significant budgetary pressure this year. Our operating challenges are echoed by others, specifically with respect to:

- Pressure in the emergency rooms, and lack of beds for inpatients
- Increasing costs and volumes of medication for oncology and other needs
- Optilab project
- Optimization targets set by MSSS for « Santé Physique »

We are actively working with the MSSS in order for them to recognize our patient population’s needs and provide us with appropriate funding.
8.2  *Presentation: Building the future of excellence in academic child care (2019-2020 strategic priorities)*

- Dr. Barnes
Building the future of excellence in academic child care

2019-2020 Strategic Priorities

CSCA and MCH presentation to the MUHC board of directors
The Montreal Children’s Hospital has implemented recurring strategic planning processes, with the goal of:

- Defining its vision for the future
- Ensuring consistent alignment of priorities with the MSSS and MUHC
- Measuring progress toward organizational goals
## 2018-2019 Objectives and Scorecard

<table>
<thead>
<tr>
<th>Pillars</th>
<th>Objectives</th>
<th>Status</th>
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<tbody>
<tr>
<td>Partnerships</td>
<td>Increase patient participation in bedside decision-making to 70%</td>
<td>62% +0%</td>
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<td>Consolidate the Maternal Fetal Neonatal (MFN) Continuum of Care</td>
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<td></td>
<td>Consolidate Complex Care Continuum of Care</td>
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<td>Innovation</td>
<td>Improve access to data by implementing an MCH Informational Portal</td>
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<td>Support MCH Foundation in planning capital campaign for securing funds for innovative practices</td>
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<td>Quality</td>
<td>Decrease ED waiting time for admitted patients by 10%</td>
<td>-4%</td>
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<td>Decrease to zero the number of patients waiting for more than 9 months for surgery</td>
<td>132 -18%</td>
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<td>Improve access to Medical Imaging by increasing the percentage of patients waiting for less than 3 months to 90%</td>
<td>CT : 90% MRI: 70%</td>
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<td>Ressources</td>
<td>Stabilize the MCH’s managerial structure</td>
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<td>Stabilize the Nursing and Medical workforces (Anesthesia)</td>
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<td>Ensure budget equilibrium</td>
<td>on budget</td>
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New Organigram: Stabilizing the MCH’s managerial structure
MCH Strategic Pillars and Objectives

**PARTNERSHIPS**

- Build partnerships with patients, families and community partners to improve the seamless coordination of care.

  - MATERNAL, FETAL, NEONATAL
  - BRAIN, DEVELOPMENT and BEHAVIOUR
  - COMPLEX CARE
  - TRANSITION

**QUALITY**

Continuously improve the quality, safety and pertinence of care.

  - QUALITY AND SAFETY STRUCTURE

**INNOVATION**

Focus on innovation, research and teaching to provide better clinical outcomes.

  - IMPLEMENT NEW INNOVATIVE PRACTICES
  - BOLSTER IS SYSTEMS

**RESOURCES**

Build and sustain human resources and adopt a management style conducive to cost effectiveness.

  - BUDGET PRESSURES
  - WORK CLIMATE & RESOURCES
PARTNERSHIPS

Build partnerships with patients, families, community partners and within the MUHC to improve the seamless coordination of care and be a leading resource for the community.
Maternal Fetal Neonatal

To consolidate the services of the MFN continuum and offer better coordination of care

Transition of Care

Create a program that systematically prepares youth and their families for the transition to adult care
QUALITY

Continuously improve the quality, safety and pertinence of care
Expand on the quality improvement program (BQAC) by creating a robust quality and safety structure that allows for a coordinated approach to reducing preventable harm.
Pillars and Objectives

INNOVATION

Focus on innovation, research and teaching to provide better clinical outcomes
Major Capital Campaign of $200M

Identify, support and implement innovative practices and programs to offer the most cutting-edge and humanistic care.

Launched on April 1, 2019
IS Systems

Aligned with the MSSS-MUHC, the MCH is looking at enhancing the electronic medical record system in order to:

- Facilitate clinical documentation
- Provide portal to patient (OPAL)
- Access data in decision making (Dashboards)
RESOURCES

*Build and sustain human resources and adopt a management style conducive to cost effectiveness*
Human Resources

Improve the work climate and reduce the sense of fatigue amongst staff and physicians, particularly in the context of ongoing budgetary compressions.

Stabilize and secure hospital manpower.
Thank you
9. Varia
Vos hôpitaux, Vos questions
https://cusm.ca/questions/form/vos-h%C3%B4pitaux-vos-questions

Your Hospital, Your Questions
https://muhc.ca/questions/form/your-hospitals-your-your-questions
10. Question Period
11. Termination